STATEMENT OF

FORM 1	ORGANIZ. (See instruction			Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, typ over the lines	e 12FE4M5	Office use only
IntegraPAC of	Integra Telecom Holdings Inc.			
ADDRESS (number and s	3213 Duke Street			
(Check if address is changed)	Suite,246			
	Alexandria		LYA L	22314 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one e rcmerbeth@integra			
COMMITTEE'S WEB I (Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE M M M O 3 3. FEC IDENTIFICATION 4. IS THIS STATEM	27 2009 TION NUMBER	C C00428094 X AMENDED (A)	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, cor	rect and complete	
Type or Print Name of	Treasurer Russell C., Meri	oeth		
Signature of Treasurer	Electronically Filed by Russell C	c., Merbeth	_ Date 03	7 27 Y 2009
NOTE: Submission of fals	se, erroneous, or incomplete information ma		•	_
Office Use Only		For further inform Federal Election Co Toll Free 800-424-	ommission 9530	FEC FORM 1 (Revised 02/2009)